

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 28  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**ST JUDE MEDICAL POLITICAL ACTION COMMITTEE**

**A. Justin Madder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 203 Cashmere Ct  
 City Cranberry Township State PA Zip Code 16066-3853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St. Jude Medical Occupation Mgr, Regional Sales, EP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 31 / 2014  
**Transaction ID : 5747805**  
 Amount of Each Receipt this Period  
 250.00

**B. Michael Rousseau**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 620 Brandon Way  
 City Austin State TX Zip Code 78733-3263  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St. Jude Medical Occupation Group President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2014  
**Transaction ID : 5762249**  
 Amount of Each Receipt this Period  
 5000.00

**C. Douglas Cronk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 623 Mint Hill Lane  
 City Lexington State KY Zip Code 40509-1918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer St Jude Medical Occupation Sales CRM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 03 / 2014  
**Transaction ID : 5763183**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00  
**TOTAL** This Period (last page this line number only)..... ▶